

#### Game One

# 2022 CARDIOVASCULAR COLLABORATIVE SEASON OPENER

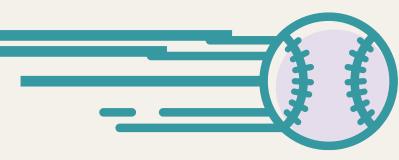
Tuesday May 3, 2022 9:00am – 1:00pm CT



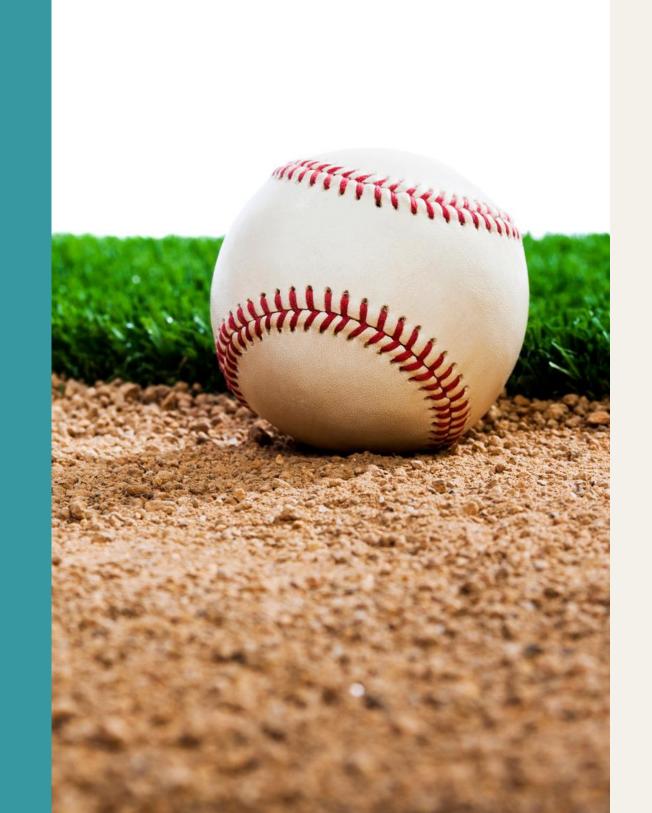
## Batter Up!

Welcome to Game One of the 2022 Annual Meeting

# The Cardiovascular Collaborative Season Opener ———

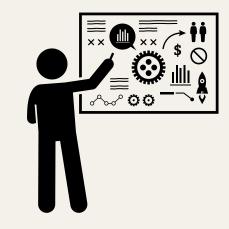






# Goals of the Meeting





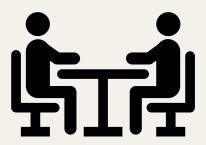
GOAL 1

Get the team up to speed



GOAL 2

Prioritize and plan for activities to work on in 2022-2023



GOAL 3

Identify partners to recruit

### Agenda

WELCOME & HOUSEKEEPING

INTRODUCTION TO 2022-2026 STRATEGIC PLAN

**BREAK** 

GOAL AREA WORKGROUP BREAKOUT SESSIONS

**CLOSING** 

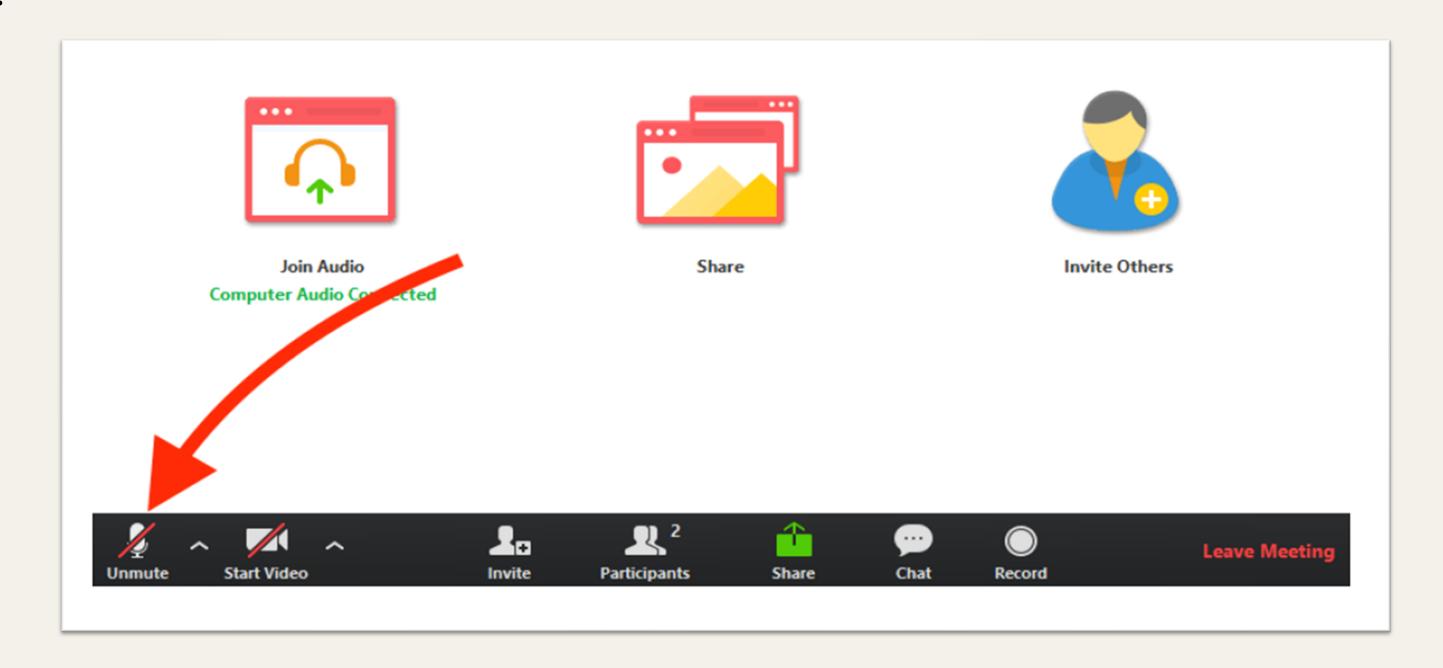


# RULES OF THE GAME

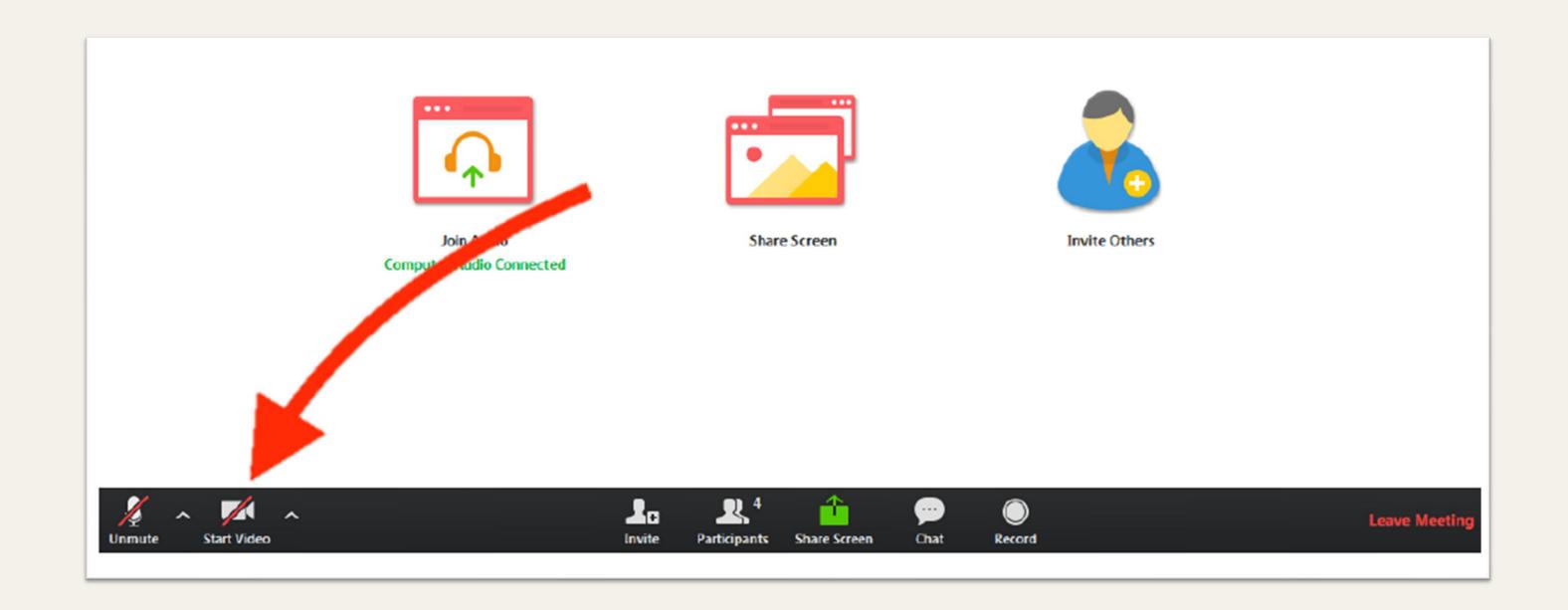
- Please mute your audio
- Cameras will remain off for now
- Questions at any time in chat box

- Meeting will be recorded
- Okay to step away as needed
- Participation is required :)

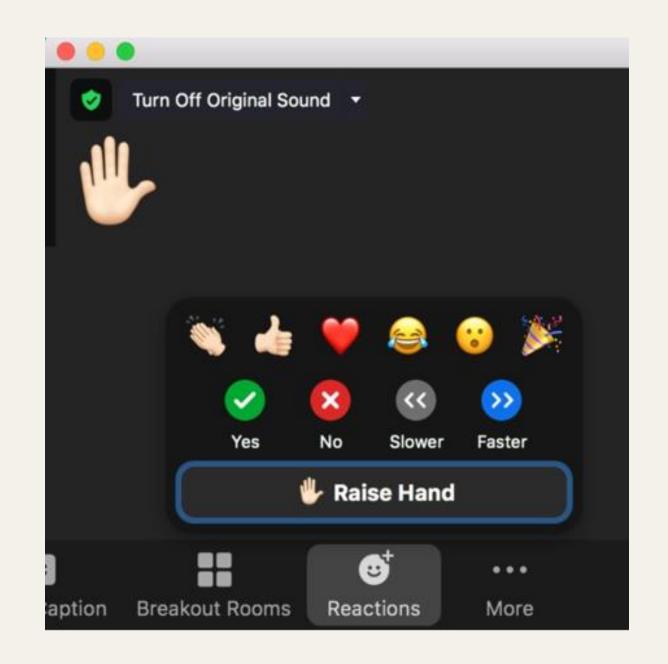
## Mute / Unmute

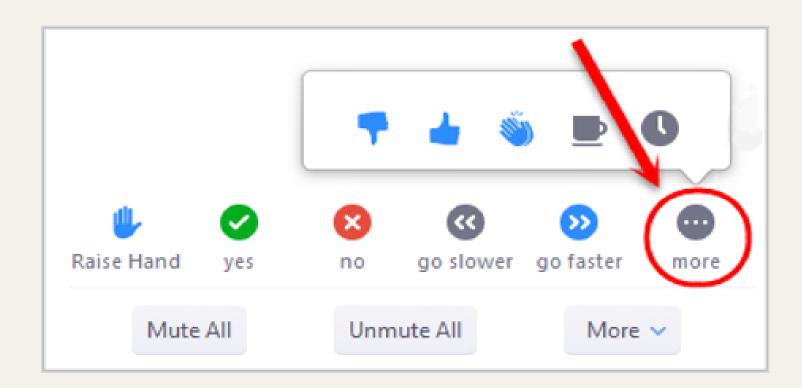


# Start / Stop Video



### Reactions

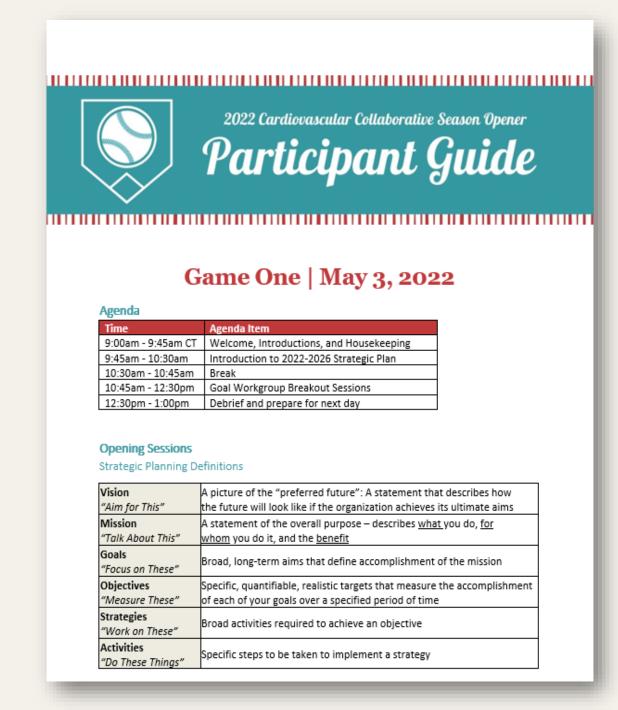




# Participant Guide

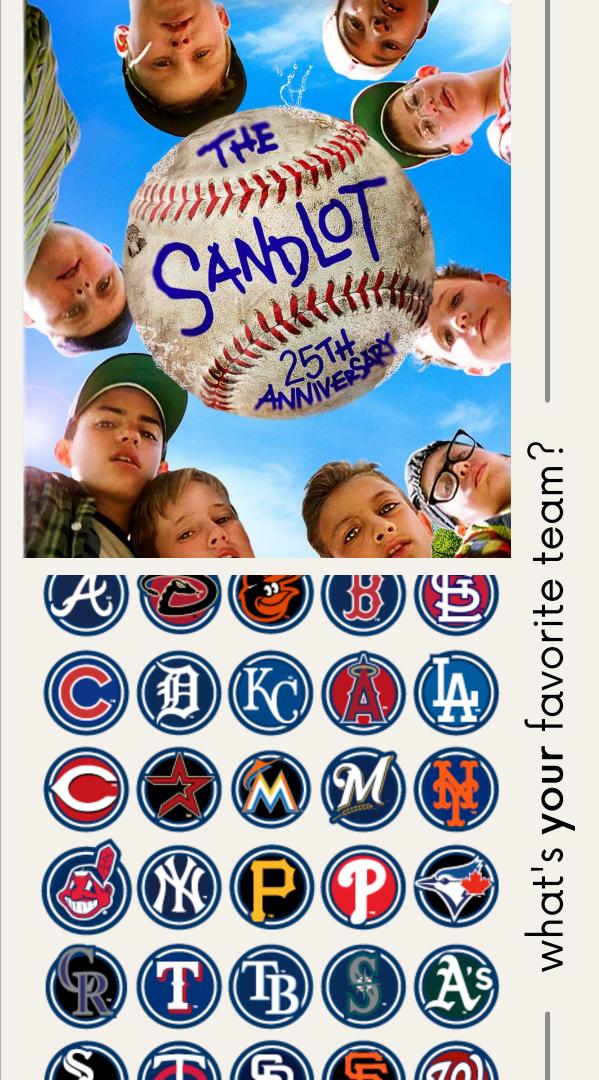
Can be found...

- In the calendar hold
- In the chat box



# Introductions / Ice Breaker

What's your favorite baseball or softball team? Can be real or fictional!



Game One

INTRODUCTION TO 2022-2026 STRATEGIC PLAN AND REVISED LEADERSHIP STRUCTURE



### Strategic Planning Process

2021 2022

March-August: Gather data & perform interviews

September:
Strategic
Planning
workshop

October December:
Refine
Goals and
Strategies

January -February Refine Objectives March-April: Finalize Plan



#### South Dakota Cardiovascular Collaborative Strategic Plan, 2022-2026

**VISION:** Healthy people, healthy communities, healthy South Dakota **MISSION:** To improve quality of life for all through prevention and management of cardiovascular disease and associated risk factors

**PRIORITY POPULATIONS:** Native Americans, people living in rural areas, people with lower incomes

Goals Focus On	I. Advance health equity in prevention, treatment, and management of cardiovascular disease	II. Optimize health through prevention of chronic diseases	III. Improve response to acute cardiovascular incidents	IV. Support cardiovascular disease management
Objectives Measure	<ol> <li>Maintain or decrease the age-adjusted mortality rate from heart disease among Native Americans at 258.3 per 100,000</li> <li>Decrease the percentage of adults with an income of less than \$25,000 who have ever been diagnosed with heart attack from 6.8% to 5.6%</li> <li>Increase the percentage of adults with an income of less than \$25,000 who report having a health care provider from 68.2% to 75%</li> <li>Maintain or decrease the percentage of adults living in rural areas diagnosed with a heart attack at 5.3%</li> <li>Increase the percentage of patients who reported that their doctor always explained things in a way they could understand from 82% to 88%</li> </ol>	<ol> <li>Maintain or increase the percentage of adults classified as having a normal weight by BMI at 29.8%</li> <li>Increase the percentage of adults who meet physical activity guidelines of 150 minutes or more per week from 45.8% to 54.5%</li> <li>Decrease the percentage of adults who currently use commercial tobacco from 26% to 23%</li> <li>Increase the percentage of adults who report visiting their doctor for a routine checkup within the last year from 76.2% to 78%</li> </ol>	<ol> <li>Decrease ambulance chute times from 3.9 minutes to 3.25 minutes</li> <li>Increase the number of Cardiac Ready Communities from 1 to 5</li> <li>Increase the number of EMTs from 3,132 to 3,850</li> <li>Decrease the age-adjusted mortality rate due to stroke from 35.4 per 100,000 to 32.0 per 100,000</li> <li>Decrease the age-adjusted mortality rate due to heart disease from 155.1 per 100,000 to 153 per 100,000</li> </ol>	<ol> <li>Increase the number of participants who complete Better Choices, Better Health SD from 460 to 741</li> <li>Increase the percentage of adults with high blood pressure who regularly check their blood pressure from 63% to 65%</li> <li>Maintain or decrease the percentage of adults who have ever been diagnosed with a heart attack at 4.2%</li> <li>Maintain or decrease the percentage of adults who have ever been diagnosed with stroke at 2.6%</li> </ol>
Strategies Work On	<ul> <li>A. Collaborate with communities and priority populations to identify and address needs related to cardiovascular health</li> <li>B. Promote equitable access to prevention, treatment, and management programs and resources</li> <li>C. Enhance partners' organizational capacity to promote health equity across sectors</li> </ul>	<ul> <li>A. Promote increased physical activity across the lifespan</li> <li>B. Promote healthy food and beverage consumption</li> <li>C. Promote commercial tobacco cessation</li> <li>D. Encourage annual preventive care visits and screenings</li> <li>E. Support healthcare professionals in counseling patients about risk factors and making referrals to prevention programs</li> <li>F. Support implementation of K-12 holistic health education programs</li> </ul>	<ul> <li>A. Strengthen the active EMS workforce</li> <li>B. Promote adoption of the Cardiac Ready Community program</li> <li>C. Promote continuity and collaboration of care at each point of the chain of survival</li> <li>D. Bolster review and utilization of cardiovascular data</li> <li>E. Promote utilization of the latest cardiac and stroke guidelines</li> </ul>	<ul> <li>A. Support referral of adults with cardiovascular disease to management programs and resources</li> <li>B. Promote utilization and support pharmacist-provided services, including medication therapy management</li> <li>C. Support expansion of the CHW profession</li> <li>D. Maximize community-clinical linkages</li> </ul>

# Goal I: Advance health equity in prevention, treatment, and management of cardiovascular disease

#### **OBJECTIVES – what we're measuring**

- 1. Maintain or decrease the age-adjusted mortality rate from heart disease among Native Americans at 258.3 per 100,000
- 2. Decrease the percentage of adults with an income of less than \$25,000 who have ever been diagnosed with heart attack from 6.8% to 5.6%
- 3. Increase the percentage of adults with an income of less than \$25,000 who report having a health care provider from 68.2% to 75%
- 4. Maintain or decrease the percentage of adults living in rural areas diagnosed with a heart attack at 5.3%
- 5. Increase the percentage of patients who reported that their doctor always explained things in a way they could understand from 82% to 88%

- A. Collaborate with communities and priority populations to identify and address needs related to cardiovascular health
- B. Promote equitable access to prevention, treatment, and management programs and resources
- C. Enhance partners' organizational capacity to promote health equity across sectors

#### Goal II: Optimize health through prevention of chronic diseases

#### **OBJECTIVES** – what we're measuring

- 1. Maintain or increase the percentage of adults classified as having a normal weight by BMI at 29.8%
- 2. Increase the percentage of adults who meet physical activity guidelines of 150 minutes or more per week from 45.8% to 54.5%
- 3. Decrease the percentage of adults who currently use commercial tobacco from 26% to 23%
- 4. Increase the percentage of adults who report visiting their doctor for a routine checkup within the last year from 76.2% to 78%

- A. Promote increased physical activity across the lifespan
- B. Promote healthy food and beverage consumption
- C. Promote commercial tobacco cessation
- D. Encourage annual preventive care visits and screenings
- E. Support healthcare professionals in counseling patients about risk factors and making referrals to prevention programs
- F. Support implementation of K-12 holistic health education programs

#### Goal III: Improve response to acute cardiovascular incidents

#### **OBJECTIVES** – what we're measuring

- 1. Decrease ambulance chute times from 3.9 minutes to 3.25 minutes
- 2. Increase the number of Cardiac Ready Communities from 1 to 5
- 3. Increase the number of EMTs from 3,132 to 3,850
- 4. Decrease the age-adjusted mortality rate due to stroke from 35.4 per 100,000 to 32.0 per 100,000
- 5. Decrease the age-adjusted mortality rate due to heart disease from 155.1 per 100,000 to 153 per 100,000

- A. Strengthen the active EMS workforce
- B. Promote adoption of the Cardiac Ready Community Program
- C. Promote continuity and collaboration of care at each point of the chain of survival
- D. Bolster review and utilization of cardiovascular data
- E. Promote utilization of the latest cardiac and stroke guidelines

#### Goal IV: Support cardiovascular disease management

#### **OBJECTIVES** – what we're measuring

- 1. Increase the number of participants who complete Better Choices, Better Health SD from 460 to 741
- 2. Increase the percentage of adults with high blood pressure who regularly check their blood pressure from 63% to 65%
- 3. Maintain or decrease the percentage of adults who have ever been diagnosed with a heart attack at 4.2%
- 4. Maintain or decrease the percentage of adults who have ever been diagnosed with stroke at 2.6%

- A. Support referral of adults with cardiovascular disease to management programs and resources
- B. Promote utilization and provide support of pharmacist-provided services, including medication therapy management
- C. Support expansion of the CHW profession
- D. Maximize community-clinical linkages

# 2022 Leadership Team



#### **GOALI**

- Laura Streich
- Rachel Sehr

#### Additional LT Members

Andrea McCauley

#### **GOAL II**

• Liz Marso

Marty Link

• Larissa Skjonsberg

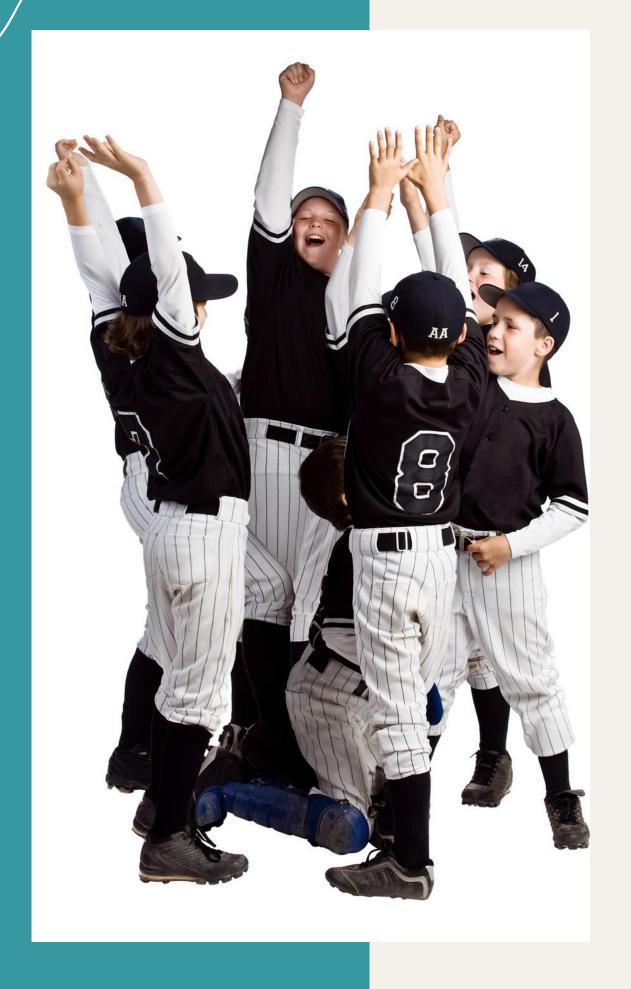
#### **GOAL III**

- Chrissy Meyer
- John Harper

#### **GOAL IV**

- Josh Ohrtman
- Rachel Sehr

Holly Arends



# DOH Cross-Program Meeting



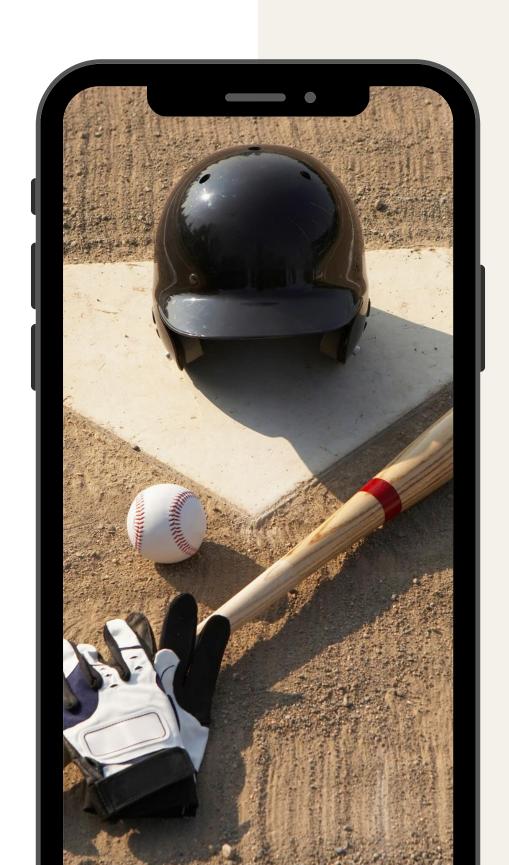


- Cancer
- Cardiovascular Disease
- Community Health
   Workers
- Dental/Oral Health
- Diabetes
- Immunization

- Injury
- Nutrition and Physical Activity
- Opioid
- Suicide
- Tobacco

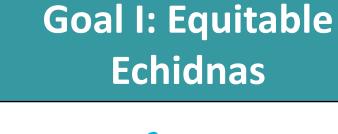
# On Deck!

We are in the process of updating recruitment materials, so look out for updated resources soon!



- One-Pager
- Communications two-pager
- Business Cards
- Email template for CC recruitment
- Rack Card
- And more!

# Team Roster: Workgroup Assignments •





Goal III: Responsive Rattlers

Goal IV: Management Macaws



Laura Streich Ben Tiensvold

Holly Arends
LaToya Brave Heart
Thomas Gulledge
Laura Harmelink
Kiley Hump
Taylor LeBrun
Lyndsey Mager
Jennifer Olson



Liz Marso Larissa Skjonsberg Kayla Magee

Stacie Fredenburg
Connie Halverson
Kathy Jedlicka
Denise Kolba
Shelby Kommes
Mary Michaels
Tim Nikolai
Sierra Phelps
Shannon Udy
Enid Weiss



Chrissy Meyer Marty Link

Chase Fredericksen
Becky Heisinger
Ellen Krogh
Amanda Saeger
Jason Schneider
Steve Schroeder
Barb Smith



Joshua Ohrtman Rachel Sehr

Kari Bruns
Diane Eide
Lisa Fox
Sean Hollearn
Andrea McCauley
Rebecca Piroutek
Lori Reetz
Colette Weatherstone

Game One

# WATER BREAK! RETURN BY: 10:45

Grab some peanuts and cracker jacks while we wait for the game to resume.



# Guess the Team Logo









Baltimore Orioles

Chicago Cubs

Minnesota Twins

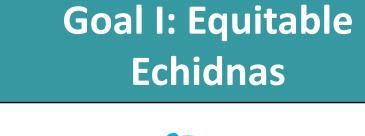
New York Yankees

Game One

# GOALAREA BREAKOUT SESSIONS



# Team Roster: Workgroup Assignments





**Goal 2: Prevention** 

# Rattlers

**Goal III: Responsive** 



**Goal IV: Management** 

Macaws

#### Laura Streich Ben Tiensvold

Ben Tiensvold
Holly Arends
LaToya Brave Heart
Thomas Gulledge
Laura Harmelink
Kiley Hump
Taylor LeBrun
Lyndsey Mager
Jennifer Olson

#### Liz Marso Larissa Skjonsberg Kayla Magee

Stacie Fredenburg
Connie Halverson
Kathy Jedlicka
Denise Kolba
Shelby Kommes
Mary Michaels
Tim Nikolai
Sierra Phelps
Shannon Udy
Enid Weiss

#### Chrissy Meyer Marty Link

Chase Fredericksen
Becky Heisinger
Ellen Krogh
Amanda Saeger
Jason Schneider
Steve Schroeder
Barb Smith

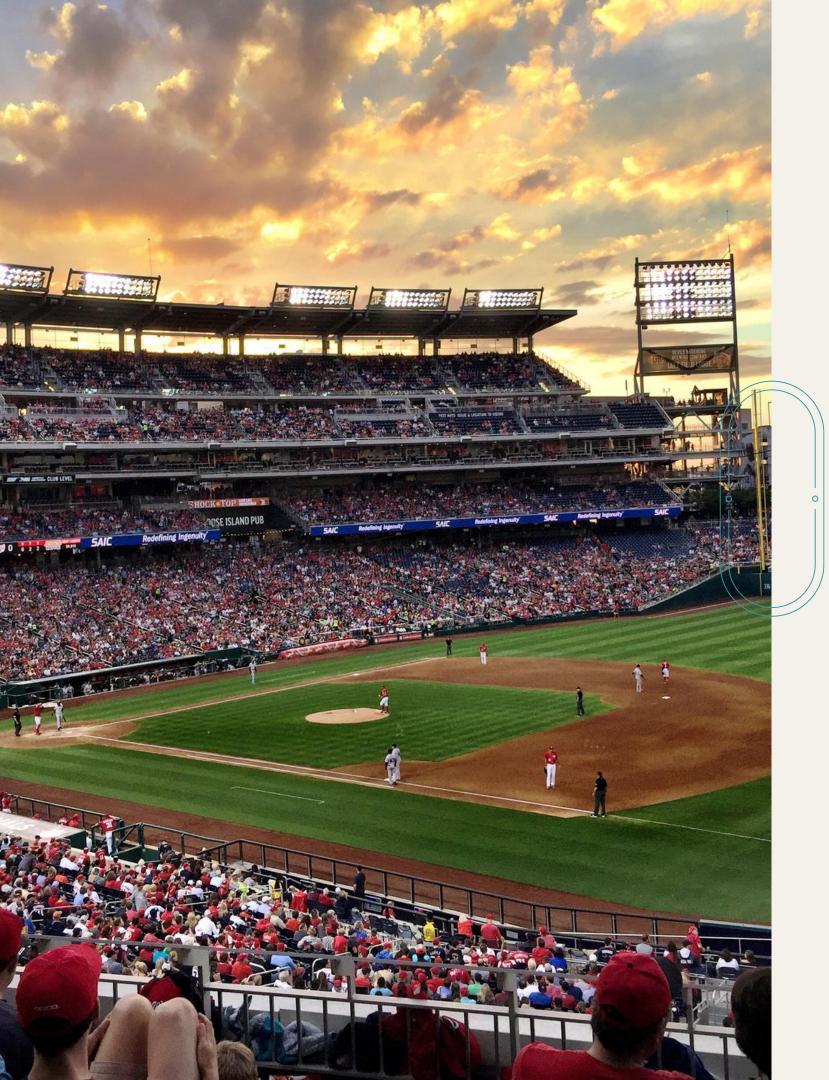
#### Joshua Ohrtman Rachel Sehr

Kari Bruns
Diane Eide
Lisa Fox
Sean Hollearn
Andrea McCauley
Rebecca Piroutek
Lori Reetz
Colette Weatherstone



### Post-Game Debrief

- - Goal Area Report Outs
  - Any Questions?
  - What is one thing that stands out to you?



# GET READY FOR GAME 2!

Wednesday May 4, 2022 9:00am – 1:00pm CT

Time	Agenda Item
9:00am - 9:30am CT	Welcome and Housekeeping
9:30am - 11:30am	Goal Area Workgroup Breakout Sessions
11:30am - 11:45am	Break
11:45am - 12:45pm	Large Group Debrief
12:45pm – 1:00pm	Closing